

POLICY OF  STATE OF DELAWARE  DEPARTMENT OF CORRECTION	POLICY NUMBER  I-05	PAGE NUMBER  1 OF 2
	RELATED NCCHC/ACA STANDARDS: P-1-05/4-4397, 4-4368 (IMPORTANT)	
CHAPTER: 11 HEALTH SERVICES	SUBJECT: INFORMED CONSENT	
APPROVED BY THE COMMISSIONER:		
EFFECTIVE DATE: 11-19-07		

**PURPOSE:**

The inmate has the information to facilitate an informed decision regarding treatment, procedures and examinations.

**POLICY:**

1. Inmates are given information necessary to give informed consent prior to initiation of a treatment, examination or procedure. Written consent is not required in every instance but information must be presented to allow the inmate to make an informed decision.
2. “Implied consent” is assumed if inmate has requested health care in writing and does not verbally refuse routine recommended care.
3. Exceptions to obtaining informed consent are in accordance with State and Federal laws and regulations. Examples of such exceptions are:
  - a. An emergency which requires immediate medical intervention for the safety of the inmate.
  - b. Emergency care involving inmates who do not have the capacity to understand
  - c. Public health matters, such as communicable disease treatment.
4. Written informed consent is obtained in the following instances:
  - a. Central Line Placement
  - b. Blood transfusions
  - c. Extractions of teeth

<b>POLICY OF STATE OF DELAWARE DEPARTMENT OF CORRECTION</b>	<b>POLICY NUMBER  I-05</b>	<b>PAGE NUMBER  2 OF 2</b>
<b>SUBJECT: INFORMED CONSENT</b>		

- d. Scope procedures
  - e. IVP procedure
  - f. Any other procedure where dye is injected
  - g. Surgery
5. Such information covers material facts regarding the nature, consequences, risks and alternatives concerning the proposed treatment, examination or procedure.
  6. Inmates receiving mental health treatment are informed of the risk, benefits and side effects of psychotropic medication prior to initiation of therapy. This is documented in the medical record.
  7. The provider and facility providing the care obtain informed consent for surgery during routine preoperative care. Correctional healthcare staff provides the inmate with clarification and information required to make an informed decision.

References:

National Commission on Correctional Health Care: Standards for Health Services in Jails, 2003, J-I-05

American Correctional Association: 3<sup>rd</sup> Edition with 2002 Supplements ALDF, 3-ALDF-4E-42 and 4E-43